



AHC Tiger Health Extension

Alcona Elementary School, 181 N. Barlow Rd., Lincoln, MI 48742 (989) 736-9837

Consent for Care

(Child's name)

(Child's date of birth)

The AHC Tiger Health Extension is a school-based health center located at Alcona Elementary School. The center serves children **3-21 years of age** who reside in the Alcona Community Schools district primarily. The AHC Tiger Health Extension is managed and staffed by Alcona Health Center.

The center provides comprehensive health care including, but not limited to:

- *Well / annual visits, immunizations, behavioral health services, acute care, care for chronic conditions, over-the-counter medication dispensing, and first aid services.*

I understand that the AHC Tiger Health Extension will be obtaining height and weight information as well as a risk assessment annually on my child. Tiger Staff use this information to promote healthy weight and lifestyle habits for your child.

I understand that the AHC Tiger Health Extension will contact me when services are provided. I have been given a copy of my child's rights and responsibilities at the center. I understand that this consent form will remain valid unless I withdraw it by submitting a **Withdrawal of Consent** form. I understand the services offered at the AHC Tiger Health Extension.

By signing this consent form, I certify that I am the parent/legal guardian of the student named above, and I give consent for the following services: (check one)

- Medical AND Mental Health services** **Mental health services ONLY** **Medical services ONLY**

I give my consent for treatment and authorize AHC Tiger Health Extension staff to provide services to my child. I authorize the AHC Tiger Health Extension to bill my insurance for services provided to my child and to release information regarding treatment of my child to third party payers (insurance companies, other health plans) for purposes of payment for services. I further authorize Alcona Elementary School to provide a copy of my child's emergency card to the AHC Tiger Health Extension annually.

Please Note:

- *Services provided within Tiger Health Extension are billed the same way they would be if these services were provided at AHC. You will be contacted prior to a billable service being delivered to your child.*
- *Family planning services are not offered at this clinic. No birth control pills or devices are dispensed or prescribed.*
- **Notice regarding attendance:** *For student safety, visit attendance is shared with the school's front office. This is the only information provided. Classrooms may also be contacted to confirm a student's presence before they are escorted to the health center. No medical/behavioral health notes or reasons for the visit are ever disclosed. Attendance records are shared solely to ensure student safety during emergency procedures (ex. Lockdown drills) and to prevent students from being marked absent.*

(Printed name of parent or guardian)

(Signature)

(Date)

Insurance company: _____ ID Number: _____

Name of Insured: _____ DOB of insured: _____

Emergency Contact Information:

Home Address: _____

Home Phone Number: _____ Parent Cell Number: _____

Mother (guardian) Name: _____ Employer Phone Number: _____

Father (guardian) Name: _____ Employer Phone Number: _____

Child's Allergies (*medication, environmental, etc*):

Daily Medications: _____

Primary Care Provider or Office _____